FORM D SEC Mall Processing Section

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington; D.C. 20549

MAR 1 U 7008

FORM D

OMB APPROVAL
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Washington, DC √100

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY									
Prefix	Serins								
DATE	RECEIVED								
1	1								

Name of Offering (check if this is	an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Type of Filing: New Filing		i) DLOE
	A. BASIC IDENTIFICATION DATA	THE WAY AND THE CONTRACT OF TH
1. Enter the information requested abo	out the issuer	
Name of Issuer (check if this is an	amendment and name has changed, and indicate change.)	(Min tati inu tan nuy min puk min muan
Marco's Franchising, LLC		08042533
Address of Executive Offices 5252 Monroe Street, Toledo, Ohio	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code) 4197203060
Address of Principal Business Operations (if different from Executive Offices)		
Brief Description of Business		
Franchisor of Marco's Pizza® Store	es	PROCESSE
Type of Business Organization corporation business trust		(please specify): iability Company imated PROCESSE MAR 1 4 2008 THOMSON E FINANCIAL
Actual or Estimated Date of Incorporatio Jurisdiction of Incorporation or Organiza GENERAL INSTRUCTIONS	n or Organization: [0] 8 [0] 3 Actual Est stion: (Enter two-letter U.S. Postal Service abbreviation for Sta CN for Canada; FN for other foreign jurisdiction)	- u, II
Federal: Who Must File: All issuers making an offe 77d(6).	ering of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C
and Exchange Commission (SEC) on the	blater than 15 days after the first sale of securities in the offerin earlier of the date it is received by the SEC at the address given t by United States registered or certified mail to that address.	
Where To File: U.S. Securities and Excl	nange Commission, 450 Fifth Street, N.W., Washington, D.C. 2	0549.
Copies Required: Five (5) copies of this photocopies of the manually signed copy	notice must be filed with the SEC, one of which must be manua or bear typed or printed signatures.	lly signed. Any copies not manually signed must be
	st contain all information requested. Amendments need only rep C, and any material changes from the information previously sup	
Filing Fee: There is no federal filing fee	s .	
ULOE and that have adopted this form, are to be, or have been made. If a state	ance on the Uniform Limited Offering Exemption (ULOE) for Issuers relying on ULOE must file a separate notice with the requires the payment of a fee as a precondition to the claim f be filed in the appropriate states in accordance with state law	Securities Administrator in each state where sale for the exemption, a fee in the proper amount shall
	ATTENTION —	
	opriate states will not result in a loss of the federal of the result in a loss of an available state exemption unl	

		A. BASIC IDI	ENTIFICATION DATA		
2. Enter the information req	uested for the fol	lowing:			
Each promoter of the	e issuer, if the iss	uer has been organized w	rithin the past five years;		
Each beneficial owner	er having the pow	er to vote or dispose, or di	rect the vote or disposition	of, 10% or more of	a class of equity securities of the issuer.
Each executive offic	er and director of	f corporate issuers and of	corporate general and mar	naging partners of	partnership issuers; and
Each general and ma	maging partner of	f partnership issuers.			
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Cleveland Marco's LLC	individual)				
Business or Residence Address 5252 Monroe Street, Tolec	*		ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)	***			
John A. Butorac, Jr.					
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
5252 Monroe Street, Toledo	o, Ohio 43623				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)			·	
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)	, ,	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
	(Use blar	nk sheet, or copy and use	additional copies of this s	heet, as necessary)	

				· . · · · · · · · · · · ·	B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Hac the	icener cole	d, or does th	ne issuer i	ntend to ce	II to non a	ccredited :	nvectore in	this offer	ing?		Yes	No Est
1.	1105 010	155001 5011	i, or does ti			n, to non-a Appendix					****************		
2.	What is	the minim	um investn					_				s_50,	00.00
												Yes	No
3. 4.		_	permit join tion request		-							_	
-1.	commis If a pers or states	sion or sim son to be lis s. list the na	ilar remune sted is an ass ame of the b you may s	ration for s sociated pe roker or de	solicitation erson or age caler. If me	of purchase ent of a brok ore than five	ers in conno ter or deale e (5) person	ection with r registered as to be list	sales of sec d with the S ed are asso	curities in t SEC and/or	he offering. with a state	· •	
Ful N/		Last name	first, if indi	ividual)	·								,
		Residence	Address (N	umber and	d Street, C	ity, State, Z	Lip Code)						
	· · - · · · · · · · · · · · · · · · · ·												
Nar	me of As:	sociated B	oker or De	aler									
Sta	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	States)	**************					***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	vidual)								• • • • • • •	
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nar	ne of As	sociated Bi	oker or De	aler		· · · · · · · · · · · · · · · · · · ·				 			
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	s" or check	individual	States)	*****************		•••••			·····	□ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	vidual)									
Bus	iness or	Residence	Address (1	iumber an	d Street, C	ity, State,	Zip Code)				· · · · · · · · · · · · · · · · · · ·		
Nar	ne of Ass	sociated Br	oker or De	aler									
Stat	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)		*****************	••••••	*********		•••••	Al	States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	c 0.00	s 0.00
	Equity		\$ 2,008,731.50
	Common 🗗 Preferred	<u> </u>	
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify 0)		\$ 0.00
	Total		\$ 2,008,781.50
	Answer also in Appendix, Column 3, if filing under ULOE.	Ψ	Ψ
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	;	Aggregate Dollar Amount of Purchases
	Accredited Investors	19	\$_2,008,781.50
	Non-accredited Investors	0	\$ <u>0.00</u>
	Total (for filings under Rule 504 only)	0	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security 0	Sold
	Rule 505		\$ 0.00
	Regulation A	0	\$ 0.00 \$ 0.00
	Rule 504		\$ 0.00 \$ 0.00
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s_0.00
	Printing and Engraving Costs	.	<u>\$ 16,810.00</u>
	Legal Fees	Z	\$_27,300.00
	Accounting Fees		\$_0.00
	Engineering Fees		\$_0.00
	Sales Commissions (specify finders' fees separately)		\$_0.00
	Other Expenses (identify)		\$_0.00
	Total	_	s 44,110.00

	C. OFFERING PRICE, NUMI	BER OF INVES	rors, 1	EXPENSES AND USE OF	PROC	EEDS		
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."	Question 4.a. Ti	nis diffe	rence is the "adjusted gros	s		s4,	455,890.00
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is no the payments li	t know sted mu	n, furnish an estimate and st equal the adjusted gros	t			
					Dir	yments to Officers, rectors, & Miliates	P	ayments to Others
	Salaries and fees	***************************************			<u> </u>		S_	
	Purchase of real estate				□ s _		□ \$_	·
	Purchase, rental or leasing and installation of mac and equipment	hinery 			\$_		□ s _	
	Construction or leasing of plant buildings and fac-	lities			□ \$ _		□ s _	
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities	of anot	her	□ \$	·	□ \$_	
	Repayment of indebtedness				<u></u> s_3	3,600,000.00	 [2] \$_	200,000.00
	Working capital	•••••			□ \$_		[] \$_	655,890.00
	Other (specify):							
					□\$		□ \$ _	
	Column Totals				 ∑ \$_3	,600,000.00	Z] \$_	855,890.00
	Total Payments Listed (column totals added)					✓ \$ <u>4,4</u>		
		D. FEDERA	L SIG	NATURE				
sig	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to fur- information furnished by the issuer to any non-accu	nish to the U.S.	Securit	ies and Exchange Commi	ssion,	upon written		
İssi	er (Print or Type)	Signature	1	Keetas	Date	 		
Ma	rco's Franchising, LLC	Y- 1	m	Sutra	2/29/0	07		
Na	ne of Signer (Print or Type)	Title of Signe	(Print	or Type)				•
Joh	n A. Butorac, Jr.	President						

- ATTENTION -----

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is D (17 CFR 239.500) at such times as required by state law.	filed a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informatissuer to offerces.	ition furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be er limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer cla of this exemption has the burden of establishing that these conditions have been satisfied.		
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behathorized person.	alf by the	undersigned
Issuer (Print or Type) Signature Date		
Marco's	s Franchising, LLC 2/29/07		

Title (Print or Type)

Plesident

Instruction:

Name (Print or Type)
John A. Butorac, Jr.

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	APPENDIX												
1	Intend to non-a investor	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)								
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No				
AL													
AK													
AZ													
AR													
CA													
со													
СТ													
DE													
DC													
FL		×	P. Units - \$4.5m	3	\$277,273.00	0	\$0.00		×				
GA		x	P. Units - \$4.5m	1	\$50,000.00	0	\$0.00		×				
ні													
ID													
IL													
IN													
IA													
KS													
KY		×	P. Units - \$4.5m	1	\$50,000.00	0	\$0.00		x				
LA													
МЕ													
MD													
MA													
MI		×	P. Units - \$4.5m	2	\$450,000.0	0	\$0.00		×				
MN													
MS													

5 2 3 1 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate offering price Type of investor and explanation of to non-accredited amount purchased in State waiver granted) investors in State offered in state (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Non-Accredited Accredited Yes No State Yes No Investors Amount **Investors** Amount MO MT NE NV NH NJ NM NY NC ND P. Units - \$4.5m 12 \$0.00 X \$1,181,508 0 OH OK OR PA RI SC SD TN TX UT VT VAWA wv WI

APPENDIX

				APP	ENDIX	······								
l		2	3		•		5 Disqualification							
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			amount purchased in State					Type of investor and explar amount purchased in State waives		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No					
WY														
PR														

